

that would give a 50-percent tax credit for small businesses with 50 or fewer employees to help them cover the cost of their employees. We know most people who don't have insurance work for a small business or work for themselves as a single employer. Let's help them.

There are things I know we could work on together across the aisle that would lower costs and tackle the real problems.

This is what I also know; that is, when people talk to me about lowering cost and addressing healthcare, they are not talking about another tax cut for multimillionaires or billionaires. That is actually not on their list of healthcare reforms. It is in the bill that is in front of us, but it is not on the list when someone says to me: You know, I want to bring down out-of-pocket costs so I can afford insurance for my kids and, by the way, would you give another tax cut to multibillionaires. That is not on the list.

If we could come together and take the two things off the table, tax cuts funded by the second thing, which is cutting medical care for seniors, families, and children on Medicaid—if we could take that off the table and focus on the real cost drivers, the real problems that need to be addressed so that healthcare is more affordable, then we would see enthusiasm on our side of the aisle and probably both sides of the aisle. I know we can come together; the Presiding Officer and I have worked together many, many times on issues. We can do this again, but we have a situation where somehow tax cuts get involved in every debate. Secondly, addressing Medicaid, which is actually saving money for taxpayers, States, and families, is part of this in a way that makes no sense.

I have said it before, but just to illustrate it one more time, our Governor and State legislature expanded Medicaid to working families, people making minimum wage, and what has happened as a result of that? Well, 97 percent of the children in Michigan can go to a doctor. What does that mean? That means they cut in half the number of people walking into the emergency room who don't have insurance and can't pay. Uncompensated care is down by 50 percent, and guess what happens. Magically, the State of Michigan is saving money. There is \$432 million more in the budget—taxpayers' money—and that savings can be used for something else important in the State, other than paying for people who don't have insurance, can't see a doctor, and have to use the emergency room.

For me, this debate gets all smooshed together with all kinds of things that aren't connected to each other. The truth is that Medicaid is saving money. More people can go to the doctor and get preventive care. Fewer people are walking into the emergency room, which is the most expensive way to get healthcare. This is working. For sen-

iors, three out of five seniors in Michigan in nursing homes are there because of Medicaid healthcare.

I am not interested in cutting healthcare for seniors, children, and working families. I am not interested in a tax cut that is going to give the top 400 people in the United States a combined \$33 billion in tax cuts. But if we want to focus on small businesses, folks who are individually buying insurance and either can't find insurance or it is too high, count me in. Count me in. That needs to get fixed, and that involves making sure that the administration does not continue with actions that are raising people's costs on purpose. We need to fix the things in the system that aren't working.

I hope that for the rest of this week, next week, and beyond, we can have some real conversations about working together to solve the real problems that deal with costs, prescription drug costs, out-of-pocket costs for people, and we can do that in a bipartisan way if we are focusing on the real problems in healthcare and how we make healthcare stronger, better, and more affordable for American families.

Thank you.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. WICKER. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### RECESS

Mr. WICKER. Mr. President, I ask unanimous consent that the Senate recess until 4:20 p.m. today and that following the recess, Senator WYDEN or his designee be recognized for up to 60 minutes.

There being no objection, the Senate, at 3:36 p.m., recessed until 4:20 p.m. and reassembled when called to order by the Presiding Officer (Mr. BLUNT).

The PRESIDING OFFICER. The Senator from Oregon.

#### HEALTHCARE LEGISLATION

Mr. WYDEN. Mr. President, the last few days have proven, once again, that political change in America doesn't start in Washington, DC, and then trickle down. It is from the bottom up.

Because millions of Americans called and texted and tweeted their opposition to an abomination of a health plan, that plan is not going to be on the Senate floor this week, thanks to grassroots America. It is so appropriate at this hour. I also want to make clear we have a bottom line for the next 2 weeks. We have an incredible amount of heavy lifting we have to do to make sure working families and seniors get a fair shake from the American healthcare system.

I say that because, as we speak, Senate Republicans are at the White House

strategizing with the President. The horse-trading has already begun, and the Senate Republicans have a slush fund paid for by working families that contains hundreds of billions of dollars that can be used for sweetheart deals that would get them the 51 votes needed to pass this horrendous healthcare bill in the U.S. Senate.

Now I will turn to what we need to focus on in the next 2 weeks at town-hall meetings, civic group lunches, discussions with rural healthcare providers. That focus has to be to highlight what this flawed Republican bill really means and how it can't be fixed no matter how much money the Republican leadership throws at these problems. This bill is a healthcare smash-and-grab, designed to benefit the fortunate few, and is paid for by hundreds of billions of dollars in reductions from Medicaid—tax breaks for the wealthy that Senate Republicans are so anxious to dole out, they are willing to make them retroactive. Contrary to what Senate Republicans say, their tax changes don't create jobs. They do create tax windfalls.

Exhibit A, under their bill, you have a \$1 million capital gain in February, and, if this bill passes, that lucky person would get a \$38,000 tax break. Many of these gains go directly into the pockets of America's 400 most affluent families, while disabled kids, those with opioid addictions, and families where a baby boomer has the misfortune of having a stroke and needs nursing home care face the prospect that the crucial health services they need—services that are life and death for them—will not be there because of this flawed healthcare bill.

Next, I want to point out that over the next 2 weeks, we are going to lay out how this legislation would send costs into the stratosphere for millions and millions of Americans. Start with older people who are about to get hit by what I call a double-age tax. If this bill goes through, insurance companies will have a green light to charge older Americans more than they charge younger people. As if that doesn't raise their costs enough, older Americans are also going to be forced to pay a higher share of their income on healthcare costs because the Senate Republican bill shrinks their tax benefits as they age. Older Americans need more healthcare. They can't afford to skimp out on bare-bones insurance. So many of our older people are going to see their premiums nearly quadruple.

It is not just older Americans who are going to see their costs jump. Right off the top, hundreds of thousands of middle-class families across the country are going to lose tax cuts for healthcare because the Republican bill snatches away their eligibility.

When it comes to the private insurance market, this bill is centered on a plan to push Americans into bargain-basement healthcare coverage. After all the talk about deductibles and out-of-pocket costs being unaffordable, this